

**Officeholder and Candidate
Campaign Statement -
Short Form**

Date of election if applicable: (Month, Day, Year) February 24, 2015	<input type="checkbox"/> Amendment (Explain Below) _____	Date Stamp Nov 12/1/14	CALIFORNIA FORM 470 For Official Use Only
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1. Statement Covers Calendar Year 20 15.

2. Officeholder or Candidate Information

NAME OF OFFICEHOLDER OR CANDIDATE

Gregory R. Sousa

STREET ADDRESS

PO Box 7082

CITY

Burbank, CA 91510

STATE

ZIP CODE

AREA CODE/DAYTIME PHONE NUMBER

OPTIONAL: FAX / E-MAIL ADDRESS

3. Office Sought or Held

OFFICE SOUGHT OR HELD

Member, Board of Education

JURISDICTION (LOCATION)

Burbank, California

DISTRICT NUMBER
(IF APPLICABLE)

4. Committee Information

List all committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	NAME OF TREASURER
(Not applicable)		
(Not applicable)		

5. Verification

I declare under penalty of perjury that to the best of my knowledge I anticipate that I will receive less than \$1,000 and that I will spend less than \$1,000 during the calendar year and that I have used all reasonable diligence in preparing this statement. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on November 30, 2014
DATE

By _____

SIGNATURE OF OFFICEHOLDER OR CANDIDATE

Clear Form

Print Form

FPPC Form 470/470 Supplement (Jan/2008)
FPPC Form 470/470 Supplement Instructions - Rev. 2 (Dec/2012)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov